

**Assistive Technology Partnership
Nebraska Department of Education
Provider Standards Form**

Mail or return to: Assistive Technology Partnership

Attn: Provider

3901 N. 27th Street, Suite 5

Lincoln, NE 68521-4177

No employee, owner or agent of _____, (hereinafter "contractor"), that may be placed by contractor at a residence or business for any project obtained through the submission of quotes to the Assistive Technology Partnership, (ATP), has any Felony Conviction in the past twenty (20) years, nor any conviction, whether Misdemeanor or Felony, at any time that involved abuse or sexual misconduct, (list of these convictions is attached), and none appear on the Nebraska Sex Offender Registry.

_____ Yes, no persons associated with contractor have any such convictions, OR

_____ * No, there are persons associated with contractor that may be placed at the job site with such convictions.

* Supply the following information about each such person below:

Full Legal Name _____

Date of Birth _____

List of convictions with date of each and state where convicted:

Full Legal Name _____

Date of Birth _____

List of convictions with date of each and state where convicted:

*Persons with such convictions or registry entries are not absolutely barred from working on all projects. However, program provider standards for some funding sources restrict ATP from endangering individuals for whom services are provided by use of persons that have engaged in or have a history of certain criminal activity. Please note that convictions identified are considered public information and the consumer will be informed as part of the quote selection process for some funding sources.

(Misdemeanor convictions that involve abuse or sexual misconduct -with the applicable sections of the Revised Statutes of Nebraska in parenthesis), (convictions under similar laws of other states are to be reported as well):

003.12A Assault (third degree) (28-310)
003.12B Child Enticement (28-311)
003.12C Stalking (28-311.03)
003.12E Unlawful Intrusion (28-311.08)
003.12G False Imprisonment (28-315)
003.12H Sexual Assault (third degree) (28-320)
003.12I Domestic Assault (28-323)
003.12J Child/Vulnerable Adult Contact with Methamphetamine (28-457)
003.12L Child Abuse (28-707)
003.12M Contributing to the Delinquency of a Child (28-709)
003.12N Prostitution (28-801)
003.12O Keeping a Place of Prostitution (28-804)
003.12P Debauching a Minor (28-805)
003.12Q Public Indecency (28-806)
003.12R Sale of Obscene Material to Minor (28-808)
003.12S Obscene Motion Picture Show, Admitting Minor (28-809)
003.12T Obscene Literature Distribution (28-813)
003.12U Sexually Explicit Conduct (28-813.01)
003.12W Indecency with an Animal (28-1010)

It is your responsibility to report changes to appropriate Assistive Technology Partnership staff (e.g. conviction status changes, no longer able/willing to provide service).

Owner/Contractor (print full legal name)

Date of birth

Signature

Date of signature